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Case 24-30281 DONIFED STIPPES/BANKRUPTET POSS 11:33:07 Desc Main DISTRICTUP NORTH BAKETA

In Re:

Jointly Administered

EPIC Companies Midwest, LLC, EPIC Companies Midwest 2023, LLC, EPIC Employee, LLC, EOLA Capital, LLC, and

EC West Fargo, LLC,

Bankruptcy No. 24-30281 Bankruptcy No. 24-30282 Bankruptcy No. 24-30283 Bankruptcy No. 24-30284 Bankruptcy No. 24-30285

Debtors.

Chapter 11

NOTICE OF OBJECTION TO CLAIM

Debtors, EPIC Companies Midwest, LLC, EPIC Companies Midwest 2023, LLC, EPIC Employee, LLC, EOLA Capital, LLC, and EC West Fargo, LLC filed an omnibus objection to your claim (Doc. 504) in this bankruptcy case.

Your claim may be reduced, modified, or eliminated. You should read these papers carefully and discuss them with your attorney if you have one.

If you do not want the court to eliminate or change your claim, then on or before **Monday, January 26, 2026**, you or your attorney must file a written response to the objection explaining your position. Your attorney may file your response electronically in CM/ECF.

Alternatively, you may mail your response to the Court for filing. Send it to:

U.S. Bankruptcy Court, 655 First Avenue North, Suite 210, Fargo, North Dakota 58102.

If you mail your response to the Court for filing, you must mail it early enough so that the court will **receive** it on or before the date noted above.

You must also send a copy to:

Attorney Steven R. Kinsella Fredrikson & Byron 60 South Sixth Street, Suite 1500 Minneapolis, MN 55402

If you file an objection or response, you must also attend the hearing on the objection, scheduled to be held on <u>Tuesday, February 3, 2026, at 10:30 A.M.</u> in Courtroom #3, Second Floor, Quentin N. Burdic <u>United States Courthouse, 655 First Avenue North, Fargo, North Dakota</u>. If you or your attorney do not take these steps, the Court will assume you do not oppose the objection to your claim and cancel the hearing.

Dated: December 19, 2025.

Sara E. Diaz, Clerk United States Bankruptcy Court Quentin N. Burdick United States Courthouse 655 1st Avenue North, Suite 210 Fargo, ND 58102-4932

By:/s/ Sharon Horsager

Sharon Horsager, Deputy Clerk

One control ologtronically December 19, 2025 to Attorney Steven Kinsella for service.

| Fill in this information to identify the | ne case: |
|--|------------------|
| | emponies LLC |
| Debtor 2 (Spouse, if filing) | |
| United States Bankruptcy Court for the: | District of |
| Case number 24-302 | 81 thru 24-30285 |
| Official Form 410 | 34-30282 |
| Proof of Claim | |

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

04/22

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

| Part 1: Identify the Claim | | | | |
|----------------------------|---|---|--|--|
| 1. | Who is the current creditor? | Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor | | |
| 2. | Has this claim been acquired from someone else? | No Yes. From whom? | | |
| 3. | Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) | Where should notices to the creditor be sent? Todd Brown Name 6060 66th Ave N.W Number Street Baisdell M.D., 58718 City State ZIP Code Contact phone 701-240-5742 Contact email browncanch@ser.com Uniform claim identifier for electronic payments in chapter 13 (if you use | Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone 201-340-3875 Contact email 5000000000000000000000000000000000000 | |
| 4. | Does this claim amend one already filed? | No Yes. Claim number on court claims registry (if known) | Filed on | |
| 5. | Do you know if anyone else has filed a proof of claim for this claim? | No Yes. Who made the earlier filing? | | |

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| 6. | Do you have any number you use to identify the debtor? | S | | |
|----|--|---|--|--|
| 7. | How much is the claim? | | | |
| 8. | What is the basis of the claim? | Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. | | |
| 9. | Is all or part of the claim secured? | No Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Other. Describe: Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: Amount of the claim that is secured: Amount of the claim that is unsecured: Amount of the claim that is unsecured: Amount of the claim that is unsecured: Amount necessary to cure any default as of the date of the petition: Annual Interest Rate (when case was filed) Fixed Variable | | |
| | ls this claim based on a lease? | No Yes. Amount necessary to cure any default as of the date of the petition. \$ | | |
| | Is this claim subject to a right of setoff? | Yes. Identify the property: | | |

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| | ATT- | | | |
|--|--|--------------------------------------|--|--|
| 2. Is all or part of the claim entitled to priority under | No No | A comment of state of the control of | | |
| 11 U.S.C. § 507(a)? | Yes. Check one: | Amount entitled to prior | | |
| A claim may be partly priority and partly | Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). | \$ | | |
| nonpriority. For example, in some categories, the law limits the amount entitled to priority. | ☐ Up to \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). | \$ | | |
| endined to profity. | Wages, salaries, or commissions (up to \$15,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. U.S.C. § 507(a)(4). | \$ | | |
| | ☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). | \$ | | |
| | Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). | \$ | | |
| | Other. Specify subsection of 11 U.S.C. § 507(a)() that applies. | \$ | | |
| | * Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or aft | ter the date of adjustment. | | |
| Part 3: Sign Below | | | | |
| The person completing | Check the appropriate box: | | | |
| his proof of claim must | I am the creditor. | | | |
| sign and date it. FRBP 9011(b). | I am the creditor's attorney or authorized agent. | | | |
| f you file this claim | ☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. | | | |
| electronically, FRBP | ☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. | | | |
| 5005(a)(2) authorizes courts to establish local rules | Tall a guarantel, early, entered, early | | | |
| specifying what a signature specifying what a signature on this <i>Proof of Claim</i> serves as an acknowledgment that when is. I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when amount of the claim, the creditor gave the debtor credit for any payments received toward the debt. | | | | |
| A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 | | | | |
| years, or both. 18 U.S.C. §§ 152, 157, and | 2, 157, and I declare under penalty of perjury that the foregoing is true and correct. Executed on date 09-10 2034 MM / DD / YYYY | | | |
| 3571. | | | | |
| Signature W. Brown | | | | |
| | Print the name of the person who is completing and signing this claim: | | | |
| | Name Todd Warren Brown First name Middle name Last name |) N | | |
| | Title Owner Manager | | | |
| | Company Company Compa | , LLC | | |
| | Address 6060 66 Hh Ave D | n. W. | | |
| | Blaisdell M.D. SE City State ZIP Code | 3718 | | |
| | | rvanchesm | | |

1-2-26

L' Also Atlonez steun R. Bingla:

This teller is a response to the notice of Objection to claim teller we received on 12-19-2. Were not exceller sure what the teller is implying but it is on moult to us that the court would suggest that we would consider wolking accord from our claim against EPIC, we expect the maximum amount book from our surest week from our surest went the face the court con second.

Signed: Vol & Crudy Zween Zlaydeld M. D. 5878